

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BS</i>		3/24
I.P.E. CLASSIFIER	<i>BS</i>	57	3-26-99
FORMALITY REVIEW	<i>MB</i>	70303	4-13

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

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**WARNING**  
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Form PTO-434  
(Rev. 6/98)

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here